COVID-19 Mitigations in the U.S.
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February 1 – 14, 2021

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This report provides highlights of a weekly survey of practices regarding the mitigation of the spread of COVID-19 in the U.S. during the first half of February 2021 along with comparisons to prior half-month time periods. The survey asks about the degree to which the respondents perceive that people in their community are following 21 common mitigation practices. The responses are separated by state and compared to state level statistics regarding the level of COVID-19 infections from the Johns Hopkins COVID database for the same time period.

Executive Summary

A slight decrease occurred in community mitigation compliance across the country in the first half of February from 63.1% in the last half of January to 62.8% this week according to observations from 466 individuals in 47 states. At the same time, new COVID-19 infections again fell sharply with 1.5 million new cases for the half month compared to 2.7 million in late January and a record 3.6 million in the first half of that month. This shows a strong continuation of the downward trend that may well persist with the help of the vaccination program.

Additional findings from the second half of January:
- The top mitigations practices held steady. Four mitigations have compliance over 75% and the fifth stood at 74%.
- Of the fifteen states where we have significant data from this week, the worst three (Texas, Georgia and Florida) had average compliance in the mid-50’s, with Florida moving back into the bottom three at 58%.
- “Quarantine people with positive tests” was the mitigation practice that had the highest one week increase in compliance. This mitigation can easily be seen to tie directly to reduced spread of infections.
- Only two states among the fifteen with significant data that had average mitigation compliance over 70% - California and Minnesota. California displayed a big jump in mitigation in response to their horrific experiences with infections in December and early January.

The full set of mitigations surveyed are included in the appendix to this report.

The vaccination program is accelerating, it is now estimated that immunities from vaccination total almost 8% of the population, while immunities from people who have been infected and recovered are also almost 8%, with the vaccinated group growing much faster than the recovered/immune group.
Mitigation Practices - National

Average percentage compliance with 21 COVID-19 mitigation strategies that are surveyed was 62.8% in the first half of February, down slightly from 63.1% in the second half of January and back to the level of early January. For the half-month, three of the twenty-one mitigations practices had average compliance above 75%, five had average compliance below 50% and thirteen had average compliance between 50% and 75%. This is the same result as the first half of January.

Nationally the weighted average of compliance with these mitigations has stayed in a very tight range a low of 62.3% in late November to a high of 63.1 for late January. When mitigations are broken out into practices within states and regions of states, there is a far greater variance in mitigations as respondents observe the results of individual states implementing changes in COVID mitigations and Individuals react to their personal perceptions of the level of COVID danger locally

CHANGING MITIGATIONS
Throughout the past eight weeks, the six mitigations that our observers say have the highest average compliance have remained the same (with “Wearing a Mask in Public” shifting in and out of the Top 5). Results from the last four periods are presented below:

<table>
<thead>
<tr>
<th>Top Five Mitigations</th>
<th>Dec 16-31</th>
<th>Jan 1-15</th>
<th>Jan 16-31</th>
<th>Feb 1-14</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special protection in hospitals areas that treat COVID patients</td>
<td>82%</td>
<td>83%</td>
<td>84%</td>
<td>85%</td>
</tr>
<tr>
<td>Visitors to senior living facilities to be restricted</td>
<td>76%</td>
<td>77%</td>
<td>81%</td>
<td>82%</td>
</tr>
<tr>
<td>Restaurants to have reduced seating</td>
<td>75%</td>
<td>75%</td>
<td>75%</td>
<td>75%</td>
</tr>
<tr>
<td>Hairdresser and barber to be open with restrictions</td>
<td>70%</td>
<td>73%</td>
<td>73%</td>
<td>75%</td>
</tr>
<tr>
<td>Quarantine people with positive tests</td>
<td>71%</td>
<td>72%</td>
<td>71%</td>
<td>74%</td>
</tr>
</tbody>
</table>

In the first half of February four of these five practices were essentially the same and one improved by 3%. The top mitigants have had an average compliance of 75% to 76% for the last two months. With the recent drop in COVID cases across the country, it is likely that the improvement in results is driven by other practices than these top 5.
Mitigation practices with the largest change are compared below.

<table>
<thead>
<tr>
<th>Mitigations with Largest Change</th>
<th>Jan 16-31</th>
<th>Feb 1 - 14</th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Get antibody testing to detect prior infection</td>
<td>39%</td>
<td>35%</td>
<td>-4%</td>
</tr>
<tr>
<td>Colleges are closed or holding only remote classes</td>
<td>58%</td>
<td>55%</td>
<td>-3%</td>
</tr>
<tr>
<td>Know Local level of COVID infections</td>
<td>57%</td>
<td>54%</td>
<td>-3%</td>
</tr>
<tr>
<td>Quarantine people with positive tests</td>
<td>71%</td>
<td>74%</td>
<td>3%</td>
</tr>
<tr>
<td>Know Local approach to limiting COVID spread</td>
<td>64%</td>
<td>62%</td>
<td>-3%</td>
</tr>
</tbody>
</table>

With the large decrease in number of infections we are currently experiencing, states are starting to relax extra restrictions that had been imposed after the winter holidays. A driver of those decreases may be nothing more than normal post-holiday behavior. As one volunteer observer suggested, “Even in a normal year, no one goes out in January.”

**Mitigation Practices – State Level**

For the first half of February, the survey had a credible number of responses from just 15 states. The states from that group with the highest compliance were California (72%), Minnesota (71%), and Massachusetts (69%). The states with the lowest compliance were Texas (54%), Georgia (57%) and Florida (58%).

Focusing in on the ten most populous states, there is quite a bit of variability of compliance over the past two months, some of which is likely driven by the variety of opinions from the observers.
California had been experiencing very high Infection Levels and the governor had reimposed severe restrictions shows large jumps in mitigation compliance over the past month. However, eight of the other nine states show decreases in compliance in early February. The only other exception being Illinois.

COVID-19 Spread of Infections – National

There were 1.5 million new cases of COVID-19 reported in the first half of February. This is down from 2.6 million reported in the second half of January and 3.6 million in the first half of that month. The reported infection level has now fallen well below the point where it was in early December. The end of the holiday season as well as reactions to the surge in cases has had a major impact here. However, the infection level is still more than twice where it stood over the summer of 2020.
The rate of new infections has been holding steady around 6% since late January. This is a very good sign since in prior periods dips like what we have been experiencing were always followed by jumps back up as the above graph shows in December and early January. With the current level below 6% there are likely to be continuing decreases in the Infection Level.
Mitigations Levels over Time

The following charts provide a perspective on the relative compliance levels of all 21 mitigations with each other as well as the trends over the past two months.
Impact of Immunities

The vaccination programs are moving forward fairly rapidly. An estimate of the potential impact of immunity gained from vaccinations and from recoveries from COVID infections shows that at this time, the impact of immunities on the spread of COVID is small but growing.

<table>
<thead>
<tr>
<th></th>
<th>1/31/21</th>
<th>2/14/21</th>
<th>Increase</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reported Recovered Immune</td>
<td>23.2 M</td>
<td>25.5 M</td>
<td>+2.3 M</td>
</tr>
<tr>
<td>Vaccinated Immune</td>
<td>20.3 M</td>
<td>35.8 M</td>
<td>+15.5 M</td>
</tr>
<tr>
<td>Total Immune</td>
<td>43.6 M</td>
<td>60.3 M</td>
<td>+14.6 M</td>
</tr>
<tr>
<td>Pct of Population</td>
<td>13.4%</td>
<td>18.9%</td>
<td>+4.5%</td>
</tr>
<tr>
<td>Est. Impact on NIR</td>
<td>-0.9%</td>
<td>-1.3%</td>
<td>-0.3%</td>
</tr>
<tr>
<td>New Infections (1 week)</td>
<td>1.1 M</td>
<td>0.7 M</td>
<td>-0.4 M</td>
</tr>
<tr>
<td>Est. Reduction of New Infections</td>
<td>0.2 M</td>
<td>0.1 M</td>
<td>-0.1 M</td>
</tr>
</tbody>
</table>

While the national average total percent immune is shown above to be 18.9%, at the state level, immune percentage ranges from a high of 24% in North Dakota to a low of 10% in Hawaii. These differences are mostly driven by the different levels of recovered immune people in the states with a lesser range of vaccinated immune.

Please note that these calculations are estimates based upon average reported efficacy of the vaccines and an assumption that people with immunity would face an average level of exposure to COVID infection. In addition, no adjustments were made to these figures to reflect the exact timing of the onset of immunity from vaccinations which varies by type of vaccine.

In addition, these calculations are based upon Reported Infections. Because COVID infections result in a very wide range of individual responses from largely symptom free to severe respiratory distress leading to hospitalization and death, there are thought to be many cases that go unreported. The CDC conducted a study of the seroprevalence of COVID antibodies in blood drawn for a variety of medical tests. Results from that study show that unreported infections may be as high as 80% of the reported infections. If that were true, the Total Immune level estimated above could be as much as 1/3 higher.

Super Bowl Parties

Observers also reported on the number of people who gathered with them this year vs. last to view the Super Bowl. The response was that on average there were only 1.6 guests in 2021 which is down by 4.2 from 2020. Over 50% of the observers said that they watched the game alone compared to about 35% last year. In 2020, 9% of the observers watched the game with more than 15 others, while there were no gatherings of that size in 2021. And only one person reported attending the game in 2020, none in 2021.
Acknowledgments

The researchers’ gratitude goes to those without whose efforts this project could not have come to fruition: the Project Oversight Group and others for their diligent work overseeing questionnaire development, analyzing and discussing respondent answers, and reviewing and editing this report for accuracy and relevance.

Project Working Group members:
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Note on Mitigation Compliance Observations

The COVID mitigation information is collected via a SurveyMonkey survey. In that survey, observers are asked to say what they are seeing in their community regarding the percentage compliance with 21 specific mitigation activities. The observers are volunteers who were either recruited personally by the project team or who responded to a variety of solicitations for observers via Twitter, Facebook, LinkedIn, and SurveyMonkey. This data is subject to self-selection and other biases. No adjustments have been made to the data that we have collected in order to respond to possible biases. Observations are aggregated and the average of multiple views are treated as true information about the mitigation activity in a state. The variance of the responses in a state has been examined and targets are set for a higher number of responses in states where there is a higher variance of responses.
Appendix List of Mitigations under Study

- Wearing a mask in public
- Maintaining social distance
- Staying at home
- Restaurants to have reduced seating
- Businesses to be closed – work from home only
- Hairdresser and barber to be open with restrictions
- Visitors to senior living facilities to be restricted
- Commonly touched surfaces to be sanitized
- Special protection in hospitals areas that treat COVID patients
- Get tested for active virus
- Get antibody testing to detect prior infection
- Quarantine people who have been in close contact with people with positive tests
- Quarantine people with positive tests
- Quarantine travelers from higher infection places
- Limit large gatherings of people
- Local level of COVID infections
- Statewide targets for reducing COVID spread
- Local approach to limiting COVID spread
- Colleges are closed or holding only remote classes
- Schools (K-12) are closed or holding only remote classes
- Violations of COVID restrictions result in fines or police enforcement
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